<b>U.</b> S.	RM 1040  Treasury Department	U. S. IN		INCOME TA (PLEASE TYPE OR PR						
MILE	rnal Revenue Service	Name(If Home address		husband and wife, use fi	rst names and middle					
		(City, town, or pos	+ office)	Postal zone	numbor)		(State)			
Your Soc	ial Security Number	Occupation Occupation	t once)	<del></del>	cial Security Number	Oc	cupation			
								·		
	If Income	Was All From S	alaries and W	ages, Use Pages	1 and 2 Only	y. See P	age 3 of th	e Instructions.		
Exemptions	Check for wife income or he included in the Included in the 2. List first names qualify as depaddress if diffe	Check blocks which apply. Check for wife if she had no income or her income is included in this return. (c) Additional \$600 exemption if 65 or over at end of taxable year.  Yourself (c) Additional \$600 exemption if blind at end of taxable year.  Yourself value is first names of your children who qualify as dependents; give address if different from yours.  Enter number of exemptions claimed for other persons listed at top of page 2.								
********								eductions (including any		
₹E <b>●</b>	excess of expe	ense account or similar	allowance paid b Where Em	y your employer ove ployed (City and State)	er your ordinary a	and necessor	ry business ex	coenses. See instructions, pp. 5-6.		
Ï 🙇	800000000000000000000000000000000000000									
B OF FORMS W-2 HERE Income	7. Balance (lin 8. Profit (or loss 9. Profit (or loss 10. Other incom	able "Sick Pay" in e 5 less line 6) s) from business fror s) from farming fror e (or loss) from pag GROSS INCOM	n separate Sche n separate Sche ge 3 (dividends	dule Cdule F, interest, per	······································	\$		If either you or you wife had more than one employer and the		
Ö	Unmarried or I of Household	egally separated pers " see instructions, pa	sons qualifying as ge 7, and check h	"Head Wide ere Speci	ows and widowe ial tax computat	rs with dep ion, see in	endent child v structions, pag	who are entitled to the ge 8, and check here		
• Allach COPY  Tax due or refund	Table on particle of you itemize if you itemize if income was all from wages, omit lines 13 through 16  17. (a) Tax with (b) Payment	was all from wages, 14. Balance (line 12 less line 13)								
	18. If your tax (I	ine 12 or 16) is lar th this return to "Int	> \$							
	1	<ol> <li>If your payments (line 17) are larger than your tax (line 12 or 16), enter the OVERPAYMENT here → if less than \$1.00, the overpayment will be refunded only upon application.</li> <li>Amount of line 19 to be: (a) Credited on 1959 estimated tax \$</li></ol>								
Did vo	<u>'</u>	illowance or reimbursem								
If "Yes	s," did you submit an it	emized accounting of ex	penses to your empl	oyer?	Yes 🗆 N	lo (instruct	ions.)			
1 0	in which you live.	ties of periury that this	enter her (his) nar	y accompanying sched	lules and statemen	ts) has been	examined by m	tax for years before 1958 No		
edge a	nd belief is a true, co	rrect, and complete retuined in the retuined in the reported in the retuined in the return in the retuined in the return in the retu	ern. If the return i	s prepared by a perso	on other than the	taxpayer, hi	s declaration is	based on all the information		

Form 1040—19	8 EXEMPTIONS FOR P	ERSONS OTHER	THAN YOU	R WIFE AN	D CHILDREN		Page 2	
	Name	Relationship	Months fived in your home. If born or died during year also write "B" or "D"	Did dependent have gross income of \$600 or more?	Amount YOU fur- nished for dependent's support. If 100% write "All"	Amount furnished by OTHERS including dependent		
					\$	\$		
44404080000000000								
Enter on line 3, par	ge 1, the number of exemptions on is based on a multiple-support a	laimed above.	nersons attach infe	ormation describ	ned on page 5 of	instructions.		
. ITEN	AIZED DEDUCTIONS—IF band and Wife (Not Legally Sepa e to whom paid. If necessary write more to	YOU DO NOT ( rated) File Separate Ret	USE TAX TAI	BLE OR STA	ANDARD DED	UCTION so Itemize		
21316	e to whom paid. If necessary write more t	nan one item on a line or altaci	i additional sheets. Fi	ease put your name	and dutiess on any attac	mients.	-	
Contributions								
	Total paid but not to exceed	20% of line 11, page 1	, except as describ	oed on page 8 c	of instructions	\$		
Interest								
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			Total interest		Ì	
						· · · · · · · · · · · · · · · · · · ·		
Taxes								
	Submit itemized list. Do not enter any	ovnonee companyated by incurs	nce or otherwice		Total taxes	*********		
Medical and	Cost of medicines and drug-							
dental expense	2. Other medical and dental							
see instructions, page 10)	3. Total							
	5. Allowable amount (excess				ations.)			
Other Deductions	***************************************							
(See page 10 of								
instructions and attach informa-	***************************************				Total		è	
tion required)	TOTAL DEDUCTIONS	(Enter here and on line	2 of Tax Compu	tation, below).		\$		
	TAX COMPUTA	TION—IF YOU	DO NOT USE	THE TAX	TABLE			
1 Fnter Adius	ted Gross Income from line 1	1 page 1				\$		
2. If deductions	s are itemized above, enter to	al of such deductions	. If deductions		ed and line 1,	•	•	
above, is \$	<b>5,000 or more:</b> (a) a marrie	ed person filing a sepo s enter 10 percent of			smaller			
	ne 1 less line 2)							
4. Multiply \$600 by total number of exemptions claimed on line 4, page 1								
	ount on line 5. Use appropri	•			1			
Tax Table o	on page 16						د _	
7. If you had a 8. Tax credits.	capital gains and the alterna		r the tax from s	eparate Sched	ule U		_	
	If you itemized deductions for income tax payments to a fore	, enter: eign country or <b>U</b> . S. pos	ssession (Attach Fo	orm 1116)	\$			
(b) Tax pai	id at source on tax-free covenant b		or partially tax-exe	mpt interest				
	and on line 12, page 1, the					\$	-	

## IF INCOME WAS ALL FROM SALARIES AND WAGES, TEAR OFF THIS PAGE AND FILE ONLY PAGES 1 AND 2

IL INCOME MAD WEE INCOM: OM.	AILIES AILE					
Schedule A.—INCOME FROM DIVIDE	NDS (Income from Savings	(Building) and Loan Associ	ations and Credit Unions	should be entered as intere	est in Schedule B)	
1. Name of qualifying corporation (Indicate by (H), (W), (J) whether stock is held by his						
				***********		
<del></del>						
					•	
2. Total			9	· )		
3. Exclusion of \$50 (If both husband a	nd wife received divi	dends, each is enti	tled to exclude			
not more than \$50 of his (her) aw	n dividends)					
4. Excess, if any, of line 2 over line	3. Enter here and	on line 1, Sched	lule ]			
5. Name of nonqualifying corporation	declaring dividend:					
6. Enter total of lines 4 and 5					\$	_
Schedule B.—INCOME FROM INTERE						į
Name of payer	Amount	Name o	l payer	Amount	-	
	-  \$			S		
						Ì
		~~~~~~				
				Enter total here->		
Schedule D Summary.—GAINS AND L	DSSES FROM SALE	S OR EXCHANGI	S OF PROPERT	Υ		
1. From sale or exchange of capital ass	sets (from separate S	schedule D)				
2. From sale or exchange of property of	ther than capital ass	ets (trom separate	Schedule D)			
Schedule E.—INCOME FROM PENSIC	NS AND ANNUILL	:9 (966 High nenaus	, page 12)			
1. Investment in contract	. \$ 4	. Amount received	this year		-	
2. Expected return	.  \$ 5	. Amount exclude		ied		
3. Percentage of income to be excluded		by line 3)			-	
(line 1 divided by line 2)		. Taxable portion			-	
1. Cost of annuity (amounts you paid)	, ,	. Amount received			-	
2. Cost received tax-free in past years					-	
3. Remainder of cost (line 1 less line 2)	1 - 1	. Taxable portion (	(excess, if any, of I	ine 4 over line 3)		
Schedule G.—INCOME FROM RENTS	AND ROYALTIES				_	
Kind and location of property	2. Amount of rent	3. Depreciation (explain in Sch. 1) or depletion	4. Repairs (attach itemized list)	5. Other expenses (attach itemized list)		
	¢	¢	<u>«</u>	\$	-	
	D	J			_	
					-	
					-	
					-	
					-	
					-	
1. Totals	\$	\$	\$	\$	_	
2. Net income (or loss) from rents an	d royalties (column	2 less sum of colu	mns 3, 4, and 5)			
Schedule H.—OTHER INCOME					_	
Partnerships (name and address)						
<ol> <li>Parmerships (name and address)</li> <li>Estates or trusts (name and address)</li> </ol>						
3. Other sources (state nature)						
					-	_
Total income (or loss) from above	ve sources (Enter he	re and on line 10	), page 1)		.   \$	

			0 - 4 6												rage 4
F	N	COM	E WAS	ALL	FROM	SALARIES	AND	WAGES,	TEAR	OFF THIS	PAGE	AND	FILE ONL'	Y PAGES	1 AND 2

Schedule I.—EXPLANATION OF DEDUC	TION FOR DE	PRECIATION CLA	IMED IN SCHLJU	LE G		
Kind of property (if buildings, state material of which constructed). Exclude land and other nondepreciable property	2. Date acquired	3. Cost or other basis	4. Depreciation allowed (or allowable) in prior years	5. Method of computing depreciation	6. Rate (%) or life (years)	7. Depreciation for this year
					-	
					-	
	~~~~				-	
Schedule J.—DIVIDENDS RECEIVED CF	REDIT (See inst	ructions, page 14)	· · · · · · · · · · · · · · · · · · ·			
1. Amount of dividends on line 4, Sche					···· \$	
2. Tentative credit (4 percent of line 1)	•	ION ON CREDIT		** * * *** *** *** ***		
<ul><li>3. Tax shown on line 12, page 1, plus</li><li>4. 4 percent of taxable income</li></ul>	amount, if any	, shown on line 8(	b), page 2			
Taxable (a) If tax is computed a lncome (b) If Tax Table is used	on page 2, the ar	mount shown on line		and less the		
Means deduction for exempts. Dividends received credit. Enter	otions (\$600 mult	iplied by the number o	of exemptions claimed o	n line 4, page 12	).	
3, or 4, above			ne smallest of the a	mounts on III	ne 2, \$	ļ
Schedule K.—RETIREMENT INCOME C						
This credit does not apply: 1. If you received 2. If you are und 3. If you are 65 o	pensions or ann ler 65 years of ag or over and unde	uities of \$1,200 or m e and had "earned ir r 72, and had "earne	ore from Social Securi ncome" of \$2,100 or m d income" of \$2.400 or	ty or Railroad I ore; OR r more.	Retirement;	
If separate return, use column B only. If joint i				Α		В
Did you receive earned income in excess of \$60 1958? Widow or widowers see instructi	☐ Yes ☐ No		Yes 🗌 No			
If answer above is "Yes" in either column, furn						
1. Retirement income for taxable year v		in line 11, page 1	l, of this return:			
(a) For taxpayers under 65 years		1 92 1	1.10			
Enter only income received fro		d annuities under	public refirement	\$	\$	
(b) For taxpayers 65 years of ag						
Enter total of pensions and annu			idends			
LIMITATION C			Ī	\$ 1,200	100   \$	1,200 00
<ol> <li>Maximum amount of retirement inco</li> <li>Deduct:</li> </ol>	me for credit c	omputation	• • • • • • • • • • • • • • • • • • • •	1,200	100	1,200 00
(a) Amounts received in taxable ye Act, the Railroad Retirement A	ar as pensions o	or annuities under t	he Social Security			
			om gross meome	+		
(b) Earned income received in taxa (This line does not apply to persons 72)						
(1) Taxpayers under 65 years of	of age, enter ar	mount in excess of	\$900		-	
(2) Taxpayers 65 or over and t	ınder 72, enter	amount in excess of	of \$1,200		ļ	
<ul><li>4. Total of lines 3(a) and 3(b)</li><li>5. Balance (line 2 minus line 4)</li></ul>		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •			
6. Line 5 or line 1, whichever is small	er					
			-			
7. Tentative credit (20 percent of line 6	<b>5)</b>			***************************************	<u>                                     </u>	<u> </u>
8. Total tentative credit on this return (i		s on line 7, column			••••	
<ul><li>9. Amount of tax shown on line 12, pc</li><li>10. Less: Dividends received credit from</li></ul>	line 5, Sched	ule J, above				
<ol> <li>Balance (line 9 less line 10)</li> <li>Retirement income credit. Enter her is smaller.</li> </ol>	e and on line 1	3(b), page 1, the c	mount on line 8 or l	ine 11, which	ever	